



Tommy Irvin
Commissioner

Georgia Department of Agriculture

19 Martin Luther King, Jr. Drive, Room 242
Atlanta, Georgia 30334-4201

APPLICATION FOR EMPLOYEE REGISTRATION CARDS

Enclose a **\$10.00** fee for each employee registration. This fee must be paid with a certified check or money order. Include registration number if requesting a replacement card.

Name of Company _____

Company license No. 9 _____

Address of Company _____

City _____ State _____ Zip Code _____

Full Name of Registered Employee _____

Social Security No. _____ Exam Pass Date _____

Registration No. 1 _____ Operational Categories HPC _____ WDO _____ FUM _____

Full Name of Registered Employee _____

Social Security No. _____ Exam Pass Date _____

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